

CIVIL COMPLAINT FORM TO BE USED BY A *PRO SE* PRISONER

IN THE UNITED STATES DISTRICT COURT
FOR THE MIDDLE DISTRICT OF PENNSYLVANIA

Tayvon
S.
Beasley sr. 084227
Full Name of Plaintiff Inmate Number

v.

Walton
Name of Defendant 1

Doo
Name of Defendant 2

Prime Care
Name of Defendant 3

Name of Defendant 4

Name of Defendant 5

(Print the names of all defendants. If the names of all
defendants do not fit in this space, you may attach
additional pages. Do not include addresses in this
section).

3:24-cv-1665
Civil No. 1983
(to be filled in by the Clerk's Office)

☒ Demand for Jury Trial
☐ No Jury Trial Demand

FILED
SCRANTON

SEP 30 2024

Per 
DEPUTY CLERK

I. NATURE OF COMPLAINT

Indicate below the federal legal basis for your claim, if known.

- ☒ Civil Rights Action under 42 U.S.C. § 1983 (state, county, or municipal defendants)
☐ Civil Rights Action under Bivens v. Six Unknown Federal Narcotics Agents, 403 U.S. 388
(1971) (federal defendants)
☐ Negligence Action under the Federal Tort Claims Act (FTCA), 28 U.S.C. § 1346, against the
United States

II. ADDRESSES AND INFORMATION

A. PLAINTIFF

Sr. Breasley Ta'von S.

Name (Last, First, MI)

084227

Inmate Number

DGP (Dauphin County Prison)

Place of Confinement

501 main Road

Address

HBC, Dauphin, Pa 17111

City, County, State, Zip Code

Indicate whether you are a prisoner or other confined person as follows:

- ☐ Pretrial detainee
☒ Civilly committed detainee
☐ Immigration detainee
☐ Convicted and sentenced state prisoner
☐ Convicted and sentenced federal prisoner

B. DEFENDANT(S)

Provide the information below for each defendant. Attach additional pages if needed.

Make sure that the defendant(s) listed below are identical to those contained in the caption. If incorrect information is provided, it could result in the delay or prevention of service of the complaint.

Defendant 1:

Walton "Bubba" aka alias

Name (Last, First)

Correctional Officer

Current Job Title

501 main Rd

Current Work Address

HBC, Dauphin, 17111 Pa

City, County, State, Zip Code

Defendant 2:

County Dauphin

Name (Last, First)

Person board Chairman

Current Job Title

Sol mau Rd.

Current Work Address

HBG, Dauphin, Pa 17111

City, County, State, Zip Code

Defendant 3:

Case Prime

Name (Last, First)

Medical

Current Job Title

Sol mall Rd.

Current Work Address

HBG, Dauphin, Pa 17111

City, County, State, Zip Code

Defendant 4:

Name (Last, First)

Current Job Title

Current Work Address

City, County, State, Zip Code

Defendant 5:

Name (Last, First)

Current Job Title

Current Work Address

City, County, State, Zip Code

III. STATEMENT OF FACTS

State only the facts of your claim below. Include all the facts you consider important. Attach additional pages if needed.

A. Describe where and when the events giving rise to your claim(s) arose.

(M block) Medical / mental health pod 14
Cell approx.

B. On what date did the events giving rise to your claim(s) occur?

Oct. 14th 2022 Approximately

C. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what?)

Mr. walton aka Bubba would not allow me to use a tablet, when asked while inmate was sleep for law library he denied and told me later, which lunch time was passing I asked again he told me no since I became a little aggressive without psych meds I was informed to take. I took meds after calling for nurse Katelyn who didn't show up but Lynn Chereve did. I was placed in the hall for walton's consideration on Cufaro's behalf of treatment. But wasn't moved because he threatened me, you wanna be moved to P block be'ron I cursed him as he did me. He also said you know who I am and I said my grandma taught me not to trust mason's. Then Jiltigan Cufaro, had me placed in lock's that day. Next day I refused to move, days later I was forcibly moved by Cuffs and a captain who knew my issues and I was to be housed there mentally not the regular hall. walton told them I faked my mental diagnoses. under Cuff movement another guard moved me to mason intentionally.

IV. LEGAL CLAIM(S)

You are not required to make legal argument or cite any cases or statutes. However, state what constitutional rights, statutes, or laws you believe were violated by the above actions. If you intend to assert multiple claims, number and set forth each claim in separate paragraphs. Attach additional pages if needed.

Added Conditions and personal
Grievances from other prisoners
I added.

V. INJURY

Describe with specificity what injury, harm, or damages you suffered because of the events described above.

• my finger was intentionally broke I
face mental trauma and the harsh conditions
make it even worse.

VI. RELIEF

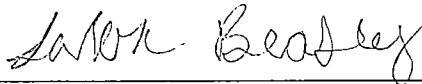
State exactly what you want the court to do for you. For example, you may be seeking money damages, you may want the court to order a defendant to do something or stop doing something, or you may be seeking both types of relief. If you are seeking monetary relief, state your request generally. Do not request a specific amount of money.

I am seeking monetary relief and personal
private assets. I want

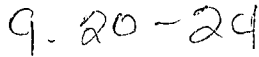
VII. SIGNATURE

By signing this complaint, you represent to the court that the facts alleged are true to the best of your knowledge and are supported by evidence, that those facts show a violation of law, and that you are not filing this complaint to harass another person or for any other improper purpose.


Local Rule of Court 83.18 requires *pro se* plaintiffs to keep the court informed of their current address. If your address changes while your lawsuit is being litigated, you must immediately inform the court of the change in writing. By signing and submitting the complaint form, you agree to provide the Clerk's Office with any changes to your address where case-related papers may be served, and you acknowledge that your failure to keep a current address on file with the Clerk's Office may result in dismissal of your case.



Signature of Plaintiff



Date

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NAME: (081622)
D.C.P.# 081622
DAPHIN COUNTY PRISON
50 MALL ROAD
HARRISBURG, PA 17111-1299

Middle District
Pennsylvania
101 Market St
Harrisburg, Pa 17101

RECEIVED
SEP 27 2024
DAUPHIN COUNTY CLERK OF COURTS

[illegible]

1088
1090

11006 DISTRICT OF PA. Court House
035 N. Wadington Ave
Scranton, PA 18501

